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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Competitive Dance Team Inc.
1705320632600 DOCUMENT NUMBER:	14
The enclosed Articles of Amendment and for	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
	Ashley Beckno
<del></del>	(Name of Contact Person)
	Paramount Competitive Dance Team Inc.
	(Firm/ Company)
	11461 Lakeside Drive, Apt. 4401
	(Address)
	Doral, FL 33178
	(City/ State and Zip Code)
	Abeckno@gmail.com
E-mail address: (	to be used for future annual report notification)
For further information concerning this matt	er, please call:
Ashley Beckno	305 498-4727 at
(Name of Conta	ct Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amour	nt made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of	g Fee & S43.75 Filing Fee & S52.50 Filing Fee  of Status Certified Copy (Additional copy is checked)  Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Paramount Competitive Dance Team Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Homestead Youth Arts Center Inc. The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc," "Company" or "Co," may not be used in the name. 112 North Krome Avenue B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) Homestead, FL 33030 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (Citv) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X. Change X. Remove X. Add	V Mik	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) × Change Add	PD	Ashley Beckno	Homestead, Fl. 33030
Remove  2) X Change Add	VD	Lianna Reynolds	112 N. Krome Ave Homestead, Fl. 33030
Remove 3 ) X Change Add Remove	<u>s</u>	Heather Beckno	Homestead, Fl. 33030
4) Change Add	<u>T</u>	John Neil Beckno	Homestead, Fl. 33030
Remove  5) Change  X Add	<u>D</u>	Natayla Hall	112 N. Krome Ave. Homestead, Fl. 33030
Remove 6) Change x Add	<u>D</u>	Julien Valme	112 N. Krome Ave. Homestead, Fl. 33030
Remove  E. If amending or add (attach additional sh		Articles, enter change(s) here: ). (Be specific)	
THIRD: The mission o	of this non-profit	organization is to 1) Empower at-risk	youth in our community by providing financial
support to low-income	families, giving	students the opportunity to receive for	rmal dance education and training, 2) Enhance
the physical, mental, a	nd emotional dev	relopment of youth through interactive	workshops, dance classes and performances.
3) Utilize the performi	ng arts to create	opportunities for community participal	tion in hands-on learning experiences in all
aspects of dance, theat	er, and visual art	s. 4) Provide an outlet for creative con	nmunity involvement through the shared

experience of live performances by prod	experience of live performances by producing new choreographic works. 5) Develop approaches to counter the inequality		
of the youth in severely underdeveloped	areas in Miami-Dade County to provide them with ample opportunities.	<del></del>	
6) Setting a platform to encourage, inspir	re, and facilitate the aspirations of youth in our community through our pe	rforming	
arts intervention programs.		<del></del>	
		<del> </del>	
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The date of each amendment(s) adoption date this document was signed.	on:	_, if other than the	
Effective date if applicable:	(no more than 90 days after amendment file date)		
N. TOUR T.			
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not tent of State's records.	be listed as the	
Adoption of Amendment(s)	(CHECK ONE)		

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
Dated	04/14/2020			
Signature (	By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)			
	Lianna Reynolds			
	(Typed or printed name of person signing)			
	Trustee			
	(Title of person signing)			